Date

November 19, 2001

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	E TRANSMITTAĮ		Application Number	09/023,232		_
	FOR FY 2001 o'	500	Filing Date	13 February 1998	- - - - -	
	VIII VIII	2 1 2007 월	First Named Inventor	Ann MONOSOV and Xinyu FU	N N	F (
	E nor		Examiner Name	A. Beckerleg	ER (P I
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106 320 206	160 Design filing fee	119	310	219	155	Notice	of Appeal		
107 490 207	245 Plant filing fee	120	310	220	155	Filing a	a brief in support	of an appeal	
108 710 208	355 Reissue filing fee	121	270	221	135	Reque	st for oral hearing	9	· · · · · · · · · · · · · · · · · · ·
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2. EXTRA CLAIM FEES	Extra Fee from	142	1,240	242	620	Utility i	ssue fee (or reiss	sue)	
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** or number previously pald,	SUBTOTAL (2) (\$) If greater; For reissues, see above.	*Reduced	by Basic Fil	ing Fee I	Paid		SUBTOTAL	(3)	180.00
SUBMITTED BY							Complete (if ap	plicable)	
Name (Print/Type)	Kate H. Murashige		tration No.		29,959		Telephone	(858) 720	-5112

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NADE		Application Number	ction of information unless it displa 09/023,232	ys a valid OMB control number.
TRANSMIT		Filing Date	February 13, 1998	HEOFINE
FORM		First Named Inventor	Ann MONOSOV	NOV 2 6 200
,		Group Art Unit	1632	TECH CENTED 1000
(to be used for all correspondence	e after initial filing)	Examiner Name	BECKERLEG	TECH CENTER 1600
Total Number Of Pages In This Submis	sion –	Attorney Docket No.	312762001530	
	ENCLOS	SURES (check all tha	t apply)	
Fee Transmittal Form		signment Papers or an Application)	After Allowa	nce Communication to
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Certified Copy of Priority Doc	ument(s) Remarks			
Response to Missing Parts/ Incomplete Application Response to Missing under 37 CFR 1.52 or				
	SIGNATURE OF	APPLICANT, ATTORI	NEY OR AGENT	
Firm Kate H. M or Registrat Individual Name 3811 Val	Murashige ion No. 29,959 ley Centre Drive, Suite 50 jo, CA 92130		TET ON ACENT	
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